

QUESTIONS AND ANSWERS ON NEW REGULATIONS

Child Care Centers (391 NAC Chapter 3)

General Questions

1. How will Licensees/Directors get answers to their questions?

Anyone involved in the operation of a Child Care Center can call or e-mail any staff in the Child Care Licensing Program with a question about regulations. A “Questions and Answers” for each type of license is on the Child Care Licensing Web Page (http://dhhs.ne.gov/publichealth/Pages/crl_childcare_childcareindex.aspx) and updated with new questions from time to time.

Information about the “Questions and Answers” will be shared with the Early Childhood Professional Development Coordinators for inclusion in their newsletters.

The Child Care Licensing Program will also establish an on-line method for licensees/directors to ask additional questions.

2. How will Licensees/Directors know when new forms are available?

When the “Questions and Answers” are posted on the Child Care Licensing Web Site, we will make sure all new forms are also posted.

Notification of Changes (3-004.06, page 14)

1. What is the procedure for changing the “name” of the Child Care Center when the ownership of the Center remains the same?

Changing the name of the Child Care Center was omitted from the regulations. The licensee would need to complete a new Application and Full Disclosure of Ownership Statement to complete this change. No new Fire Safety, Sanitation, or Child Care Licensing inspections would need to be conducted if the only change was in the name of the Center.

Background Checks (3-006.03, page 19)

1. Criminal History Report checks - can Child Care Centers accept a copy of this report or does it need to be the original?

Child Care Centers and the Department will accept a copy of the Criminal History Record Check as long it has not been tampered with, if not complete, or otherwise not true and accurate copy and is recent.

2. Criminal History Report- how old of a report is too old- applicant may have obtained the report and been hired by one center, then decides to leave and apply elsewhere and has a copy of her report from say six months ago- is that considered current or would the history report need to be obtained again by the applicant

The Criminal History Record Check should be current as of 30 days of the date the applicant/volunteer applied to work/volunteer at the Child Care Center unless the Department has approved a longer time.

3. Is a Minor in Possession (MIP) a disqualification to work in a Child Care Center?

An MIP and any other indictments or convictions not specifically listed will be considered under 3-006.03A5 Department Determination. The Department will consider the following factors:

- a. The age of the individual at the time of the conduct;
- b. The recency of the conduct;
- c. The seriousness of the conduct;

- d. The factors underlying the conduct;
- e. The cumulative effect of the conduct;
- f. The evidence of rehabilitation;
- g. The individual's positive social contributions since the conduct;
- h. The individual's honesty in providing information; and
- i. The materiality of any omissions or misrepresentations.

One Minor in Possession would not disqualify an individual from working in a Child Care Center.

4. If a staff member was hired prior to May 20, 2013 and sometime later leaves employment for a while or say goes back to college in the fall, do they have new hiring date? And have to do everything that is now required?

If the Child Care Center considers the employee "new hire", then anyone hired after May 20, 2013, must meet the new requirements and background checks.

If the Child Care Center considers the employee to be on a "leave of absence", then the employee could be re-instated, however, the employee would need to meet the in-service training, Health Information Report and other regulations of an employee.

5. If a Child Care Center staff takes a leave of absence, how long can they be gone until they would be considered a "new hire" and the facility has to have the new items required for new staff members in the employee's file.

The length of time a Child Care Center staff can be on a "leave" of absence needs to be addressed in the Center's Written Personnel Policies. If asked this question by a Child Care Center, the Child Care Inspection Specialist will refer to the Centers' Personnel Policies to determine the maximum length of time a staff can be on a "leave of absence".

6. The CCC regulations only mentions allowing a parent who has been listed on the Sexual Offender registry to be allowed on the premises only to drop off and pick up a child. A few center directors asked about parents who they know are on the Child Abuse/Neglect Central registry and/or have a history of behaviors that include violence. I looked through the new regulations and don't see anything that addresses allowing or not allowing individuals on the child care premises who they know are on central registry for abuse/neglect or have a history of violent behavior. Is there something in the new regulations that address this? And if not, what are your thoughts.

There are no restrictions on allowing parents who have a history of child abuse, child neglect, or criminal history from dropping off or picking up their children from any licensed child care program. Special attention was given to parents who are on the Nebraska State Patrol Sex Offender Registry for two reasons:

- This is a "public" registry and the Department wanted to eliminate concerns by licensees and others that a "registered sex offender" would be seen on the premises of a licensed child care program; and
 - Since the Nebraska State Patrol established the Sex Offender Registry, we have gotten quite a number of calls from providers and parents (not on the Registry) about what, if any, contact a parent who was on this Registry could have with a licensed child care program. The regulation is consistent with how we have responded to these questions over the years.
7. At an activity with the children that involves the parents that may or may not be on the center premises (activity may be at a park), can a parent who is a registered sex offender attend the activity or are they still limited to pick up or drop off only?

A parent of a child enrolled at the Child Care Center who is a known registered sex offender can only be on the center premises to drop off or pick up their child(ren).

If the Child Care Center wants to include a parent who is a known registered sex offender in an activity off the premises of the center, the parent must be supervised at all times and can only be left alone with his/her own children. Child Care Centers that want to include a parent who is a known registered sex offender in an activity off the premises of the center are encouraged to consult with their insurance agent and/or legal counsel.

8. Staff that are already employed at a CCC who are 18 and turn 19 after May 20 - do they need to do a Criminal History record Check?

If staff are hired when they are age 18 or younger then turn age 19 on or after May 20, 2013, they are not required to obtain a Criminal History Record Check automatically. These staff are required to submit a "Record of Law Enforcement Contact" to the Director, and, if the individual reports "arrest, misdemeanor ticket other than a traffic violation, pending criminal charges, and any felony or misdemeanor convictions", "the licensee/director must request a criminal history record check on the individual within five working days". Failure to notify the Department of law enforcement contacts as described may result in disciplinary action. (3-006.03D Notification of Law Enforcement Contact)

9. Can Child Care Centers, School-Age-Only Centers and Preschools use companies such as "One Source" for backgrounds checks as the new regulations require criminal history record checks to be "conducted through the Nebraska State Patrol or through one or more local law enforcement agencies, as appropriate to the individual's residence(s)".

Any company that conducts background checks on applicants for employment or employees such as "One Source" or "Sterling" must obtain criminal history records from law enforcement agencies. Thus, it is fine when licensed programs use a service like One Source for criminal history record checks.

Sometimes "One Source" background checks include the Child Abuse/Neglect and Adult Protective Services Central Registry checks in Nebraska and other states where the applicant/employee has lived. More often, the Central Registry checks are not included. Also, most companies conduct Sex Offender Registry checks using the National Sex Offender Registry and the state specific registries where the applicant/employee has lived. "One Source" and other such company records typically list the sources of the checks that are included.

10. Do companies that provide background checks need to be approved?

No, there is no "approval" process by any government agency. If any Licensee or Director observes improper behavior on the part of any company that conducts background checks, the Department should be notified immediately.

11. Do you need a criminal background check done on high school students who come for a child development class?

High School students who are not providing care, are supervised at all times, and are not left alone with any children are not required to have any background checks. Criminal History Record Checks and Record of Law Enforcement Contacts are required when an individual 19 years of age or older is working or volunteering in a Child Care Center.

12. Will printing the results of the Nebraska State Patrol Sex Offender Registry check and placing that document in the staff/volunteer file meet the documentation requirement in the regulations?

Yes, printing the results of the Nebraska State Patrol Sex Offender Registry will meet the requirement.

Substitute, Support Staff, Volunteer, and Parent Helper Qualifications (3-006.06, page 25)

1. What are the qualifications for aides - ages 16 years to 18 years? Do they fall under support staff – in regulations support staff is only identified as food service, transportation, clerical or custodial? Would the center be responsible for identifying what the job description and qualifications are - but included under Support Staff?

There are two applicable definitions:

Staff means an individual who provides direct care to the children attending the child care center, including the licensee, director, teacher, aide, and any other individual who counts in the staff-to-child ratio.

Support staff means an individual employed by the center as a food service, clerical, custodial, or transportation staff.

It was intended that the term “support staff” be inclusive of all positions in a Child Care Center except for Licensee, Director or Teacher, to include direct care staff AND food service, clerical, custodial and transportation staff.

One of the Director Requirements in 3-006.02 is #4:

4. Provide written personnel policies and policies and procedures specific to:
 - a. Job descriptions and responsibilities; and
 - b. Position qualifications, skills, knowledge, abilities and physical demands of the job;

It is up to the Center to determine job titles and job descriptions and for each job title, identify the responsibilities, qualifications, skills, knowledge, abilities, and physical demands of the job.

Once hired, the documents that need to be kept in the employee’s file are listed in Employee Records Requirements (3-006.11).

2. If a licensee owns/operates two centers and is planning to open another center after the May 20th effective date of new regulations, is it possible to transfer any staff members who have worked at the current operating centers that want to work at the new center/location - staff who were hired prior to May 20th?

The licensee wants to offer positions at the new center to those who have worked for her - but if going to the new provisional program that will be licensed after May 20th, would those staff members be considered new hires and require the additional background check information that is now required and would not be in their current staff records (i.e. I criminal history record check; sex offender registry check as the extra background checks, signing a new Report of Law Enforcement Contact form)?

It is OK for the licensee to “transfer” employees to her new center. However, the positions of “Director” and “Teacher” have new requirements. Persons preparing food and transporting children would need to have the required training under the “new center” requirements.

All staff hired to work at the new center would require Criminal History Record Checks, Report of Law Enforcement Contacts (we will accept the F/M Statement), Sex Offender Registry checks, CAN/APS checks, proof of Orientation Training before they work with children, and anything else that is required under the new regulations.

3. Are parents who come to help with Valentine’s Day party, Christmas, etc...considered subs or volunteers or anything? If so what are they and what do Child Care Centers have to have on them? Anything? These are sporadic parent helpers NOT counted in RATIO and NEVER left alone.

These individuals would be considered, “Uncompensated parent helpers” - the parent(s) of a child enrolled in the center who, without compensation, assists in the care of children, who does not count in the staff-to-child ratio, and who is not left alone with children other than his/her own at the center.

The director may use volunteers and uncompensated parent helpers. Volunteers and uncompensated parent helpers are not counted in the staff-to-child ratio. Volunteers and uncompensated parent helpers must be supervised by the director or a teacher at all times and must not be left alone with any children other than their own. (3-006.06 Substitute, Support Staff, Volunteer, and Parent Helper Qualifications)

No background checks are required on Uncompensated Parent Helpers.

4. If a new staff has no experience/education, and they want them to be a teacher that individual must complete 45 clock hours (or three (3) credit hours) in the first 6 months? Will we credit these hours for annual in-service as well, or do they need an additional 12 (or 6 depending on # of hours worked)?

The 45 clock hours or three credit hours needed to qualify an individual to be a “teacher” do not count toward the 12 clock hours of in-service training for full time staff or 6 clock hours for staff who work 20 or fewer hours/week. The 45 clock hours are intended to compensate for not having the experience or education requirements for the position of “teacher”.

Centers that have an established curriculum for Orientation – which all will be required to have – may count the number of clock hours of “Orientation Training” as long as this is completed before the new staff begins to work directly with children.

New Teacher and Staff Training Requirements (3-006.09, page 27 & 3-006.10, pages 27-28)

1. Can the Orientation that a CCC Director does for new staff count toward in-service hours?

If new staff who are not “teachers” are hired, the clock hours spent in “Orientation Training” can count toward the in-service requirement for those staff.

If new teachers are hired and the teachers meets all the qualifications for the position of teacher without needing a “plan” to acquire training and/or education, the clock hours spent in “Orientation Training” can count toward the in-service requirement for those teachers.

If new teachers are hired but the new teachers do not meet the requirements for the position of teacher and need a plan to acquire training and/or education and if the clock hours spent in “Orientation Training” are credited to the person meeting teacher requirements, then the clock hours spent in Orientation Training cannot count twice – once for meeting the qualification and the second time for in-service requirements.

2. If a Child Care Center Director completes the Early Learning Guidelines training, then can that director use the self-study training materials available through ECTC to train the center staff?

The requirement is:

3-006.09B Nebraska’s Early Learning Guidelines Training: Teachers must receive training in the domains of Nebraska’s Early Childhood Learning Guidelines developed by the ECTC. Any proposed equivalent training must be approved by the Department.

There are two ways an individual can obtain Early Learning Guidelines Training: 1) Complete a face to face training conducted by a trainer approved by the Early Childhood Training Center, or, 2) Enroll in the Self Study with the Early Childhood Training Center.

The Director could contact the Early Childhood Training Center about becoming an approved trainer for ELG Training. If approved, the Director could train Center staff on one or more of the Domains included in the ELG Training.

3. If a Child Care Center does not serve infants, are the Directors and Teachers required to take “Safe Sleep/SIDS Prevention” and “Shaken Baby” Training?

Yes. All programs licensed as a Family Child Care Home I or II or a Child Care Center are required to take all three curriculums of Safety Training. Only School-Age- Only Centers and Preschools are not required to complete these trainings.

4. Do the self-study packets for the Early Learning Guidelines (2 hours) work for meeting the requirement for having to complete the ELG? Or do they have to attend the face to face trainings?

The self-study for each Domain includes three packets estimated to take two hours each to complete. A percentage of Teachers in Child Care Center only have to complete one Domain of training so a Teacher could either complete the full six hours by self – study or face-to-face training.

5. Is there a date when Licensing will be accepting other training or course work to see if they are equivalent to the new required training?

Question # 10 on the “Frequently Asked Questions About New Training Requirements” handout states: If I have an Associates’ or Bachelor’s Degree in Early Childhood, Child Development, am I required to take all the new training?

Answer: Yes. You will still be required to take “Safety Training”. You may request the Department to consider college level courses as an equivalent to “Early Learning Guidelines” and/or “Child Care Management Training”. See the Child Care Licensing Web Site for more information later in 2013.

The Department will be identifying specific degrees from specific Nebraska colleges/universities received after a specific date as an equivalent to Early Learning Guidelines and/or Child Care Management Training.

There are a number of trainings that would be considered an equivalent to Safe Sleep/SIDS Prevention and Shaken Baby – two of the three required curriculums for Safety Training. To date, I am not aware of any other training on Child Abuse/Neglect/Reporting that address the “caregiver” as a potential abuser of children so I do not anticipate any “equivalencies” for this curriculum.

We would accept the clock hours of training on Child Abuse/Neglect/Reporting conducting by other entities (i.e. Child Advocacy Centers), but not as an equivalent to the required Safe with You Training.

6. Trainers for Safe With You, Early Learning Guidelines, and Management Training: Are they required to take the trainings? How do we know who is a trainer and what documentation do they need to provide to us?

Individuals who have completed “Train the Trainer” with the Early Childhood Training Center for any of the new required training has met the requirement for completing that specific training. Individuals should have documentation they have completed “Train the Trainer” or you can contact the Early Childhood Training Center to confirm a specific individual is an approved trainer for specific curriculum.

In the future, there will be a Training Registry that you will be able to access that will have the names of everyone who has completed training in any of the new required curriculums and the approved trainers for these curriculums.

Employee Records Requirements (3-006.11, page 29)

1. We have centers in 8 counties under one licensee. Do we need to have the staff files kept on-site at each center? Or, can staff files be kept at our home office location where our Human Resources Department is located?

Whenever a Child Care Center has administrative offices where staff records are maintained, the Child Care Inspection Specialist assigned to that center will conduct “staff records checks” at the administrative office as long as that office is located in Nebraska.

Nutrition and Food Safety Training (3-006.10B, page 28)

1. The training that most staff who prepare food have taken to this point is only two (2) clock hours. So can they just get two (2) more hours of training, and where would they find that?

Child Care Centers that participate in the Child and Adult Care Food Program are required to obtain 2 clock hours of training each year. This training will count toward the annual requirement of 4 clock hours. Centers located in urban communities and trade centers should be able to obtain face to face training through their local Health Authority. Hospitals and Nursing Homes may also offer Food Safety Training. There is training on food safety, menu planning, and food storage on line.

Staff hired on or after May 20, 2013 to prepare food need to obtain 4 clock hours of training in nutrition and food safety within 30 days of hire.

Staff hired before May 20, 2013, have one year from their date of hire to obtain 4 clock hours of training in nutrition and food safety.

2. When a Child Care Center serves meals prepared by schools or parents are required to provide meals, are any of the Child Care Center staff required to attend Nutrition and Food Safety Training?

No, when the Child Care Center does not prepare meals, the Center would not have staff responsible for menu planning, food preparation, or food safety. Thus, the Center would not need to send staff to Nutrition and Food Safety Training.

3. Do Child Care Centers s offering school-age only programs or who **only** serve snacks need anyone to complete the four hours of food/nutrition training?

If the CCC does not serve MEALS they are not required to obtain “Nutrition and Food Safety Training”. Here is the regulation for CCC:

3-006.10B Nutrition and Food Safety Training: When meals are served, all staff responsible for menu planning, food preparation, and food safety must be provided at least four clock hours of training in nutrition and food safety within 30 days of employment and annually thereafter.

The regulation regarding Nutrition and Food Safety Training is the same for School-Age- Only Centers. Thus, if for whatever reason, a Child Care Center does not license their programs as a School-Age-Only Center, they would still not be required to obtain this training if they do not serve meals.

Transportation Training (3-007.10C, page 28)

1. Does every driver have to complete the training? What if it is a sub driver that does not normally do it but is helping someone out when sick, medical apt. etc.

The regulation requires, “Everyone who transports children on behalf of a child care center” to obtain the safety training, CPR, and First Aide. Obviously, is an individual only transports children one time, we would not require the training. But, if the individual is a regular “substitute” for the driver, then that individual needs to meet the training requirements.

2. Staff who transport children and already have a Commercial Driver’s License (CDL). Do they also have to have the “Safe Kids Buckle Up” training?

If the Child Care Center serves infants, toddlers, and/or preschool age children, the buses used to transport children are less than 10,000 lbs., and the CDL training included proper installation of car seats, booster seats and proper restraints, the staff who transport children do not have to take “Safe Kids Buckle Up” training.

If the CDL Training does not include proper installation of car seats, booster seats and proper restraints and the buses used to transport children are less than 10,000 lbs. , then the staff who transport children will need to take “Safe Kids Buckle Up” Training.

See “Transportation” questions for buses that are more than 10,000 lbs.

Annual Training (3-006.10D, pages 28 - 29)

1. My Child Care Center has already had one inspection in 2013 and training records for 2012 were reviewed. The total clock hours of training for CPR and First Aid were already approved for the required 12 clock hours of training. Will the Child Care Inspection Specialist change the number of clock hours for CPR and First Aid and require staff to have more training?

Training records are always reviewed for the past year. Thus, CPR and First Aid training taken before May 20, 2013 will count for the actual clock hours of training.

CPR Training taken on or after May 20, 2013 will count for two clock hours and First Aid Training taken on or after May 20, 2013 will count as one clock hour.

Children’s Records (3-006.12, pages 30-31)

1. Do providers need to add allergy information and current health status of children to “old” records if these children were enrolled before May 20th? Can we just accept the old children’s enrollment form for those children and enforce the new information for children just recently enrolled?
 - **The two most current versions of “Children’s Record Form” (CRED-0364 dated 4/13 and CRED-0363 dated 10/09) already include allergy information and current health status of children.**
 - **If licensees are using the 6/07 or any older version of Children’s Record, they need to start using the April 2013 version with newly enrolled children.**

Parent Information Brochures (3-006.13, page 31)

1. When the Parent Information Brochures are printed, how will they be distributed to Child Care Centers? When Centers get copies of the brochure, should they provide to all parents and get receipts?

Parent Brochures are being sent to all licensed programs from Central Office in Lincoln. Each currently licensed program will get three (3) times their license capacity of brochures. Newly licensed programs will receive three times their license capacity of brochures with their Provisional License.

Centers then need to distribute the Brochures to parents of children who are enrolled in the center and retain the receipt with the name and date the parent received the brochure in the child(ren)’s file. One brochure is required for each family of children that are enrolled in the Center.

2. Can a Child Care Center substitute their own “parent handbook” or other written description, if all the elements in the Department’s Parent Information Brochure are included?

Yes, a Child Care Center can substitute their own document as long as all the elements in the Department’s parent Information Brochure are included.

3. Are Parent Information Brochures available in any language other than English?

At this time, Parent Information Brochures are only available in English.

Description of Services (3-006.14A, page 31)

1. Is it acceptable for Child Care Centers to put their Description of Services in writing and post it to meet the requirement “must be given to parents and the Department upon request?” Or, does it actually have to be on something that can be handed out?

The Description of Services must be in a format to be “given to parents and the Department”. Thus, it has to be in writing, legible, include all required elements.

2. # 7 in the “Description of Services” requires the Name, address, and phone number of the center’s owner or authorized representative to be given to all staff and the parents of all enrolled children. Does this mean the personal address and phone number of the owner must be shared with staff and parents

The address and phone number of the owner or authorized representative may be the address and phone number of the Child Care Center or personal address/phone number but the phone number must be the direct line/personal phone number of the owner or authorized representative. The intent of this regulation is that staff and parents need to know how to contact the owner or authorized representative with questions or concerns.

3. In the Description of Services, it states Child Care Centers have to list “special services provided.” What is considered a special service?

Examples of some “real” “special services” offered by some Child Care Centers across the state include: health/vision/hearing screenings, home visitation, drop off/pick up for dry cleaning, respite care services for children with special needs, extra activities (i.e. dancing lessons, gymnastics) provided on the premises by an entity other than the licensee for an extra fee.

Most Child Care Centers do not offer any “special services”, but if the center does offer one or more of these services, it must be included in the Description of Services.

Staff-To-Child Ratio (3-006.15C, page 32)

1. Can you please give us further explanation of this regulation: 3-006.15B #4a: At least two staff members must be on the premises at all times, except: a. When the number of children in care is 12 or fewer.

First, this is not a “new” regulation. The previous regulations allowed a Child Care Center to have one staff on the premises when eight or fewer children were in care. This number was increased to 12 because one of the first drafts of the regulations allowed Child Care Centers to maintain the same staff-to-child ratios as “Family Child Care Home II” programs when the number of children in care was at 12 or fewer for an extended period of time (i.e. end of day, overnight). That language got dropped somewhere in the process.

Second, all Child Care Centers must maintain staff-to-child ratios at all times:

3-006.15C Staff-to-Child Ratio: The center must maintain accurate staff and daily attendance records to verify compliance with staff-to-child ratios. Compliance with staff-to-child ratios is determined on a center-wide basis. Only staff involved in the direct care of children are counted. The appropriate staff-to-child ratios must be met at all times, as follows.

Thus, the only time a Child Care Center could have one staff on the premises with 12 children is when the children in care are 4 – 5 years of age and/or school-age. Adding even one child younger than 4, would require two staff with 12 children.

This regulation would have made much more sense if the language allowing Child Care Centers to follow FCCH II staff-to-child ratios was not dropped.

2. The center has a position of teacher aide and if a person is hired as a teacher aide but also meets the qualifications of a teacher can that person at any time be left alone with the children?

It is the center who determines whether staff are teachers or teacher aids. If they determine a staff is a teacher then they need to make sure that individual meets the teacher qualifications. Thus, if an inspection was conducted and there was no “teacher” in the room, the center would be out of compliance with the requirement that there has to be a teacher in each room where children are in care.

Communicable Diseases (3-006.15, page 33)

1. In the Child Care Center regulations, page 33, 3-006.16A-Communicable Diseases—If a center has pink eye in the 2 year old room do they have to notify ALL parents of ALL children enrolled? I think this would be cumbersome in some of the larger capacity centers. We just need some clarification about what “notify” means and “who” all needs notified.

The licensee/director must notify parents of all enrolled children of any case of any reportable communicable disease on the same day the licensee is informed of or observes the illness, unless otherwise directed by the health authority. The health authority is the local health department for the area. Proper notification includes:

- Notification to parents of children in attendance;
- Notification to parents of enrolled children who are not in attendance on that day; and
- Posting notice of the outbreak in a conspicuous place.

Yes, all children enrolled in the CCC must be notified. Notification can be accomplished by sending a written note to the parents with children in care that day or calling or e-mailing parents with children in care that day or parents whose children were not in care that day. Mailing a letter would be acceptable, but e-mail is probably faster and cheaper.

2. What is considered an “outbreak”?

An “outbreak” is one or more cases of a communicable disease.

3. Clarification is needed on reportable diseases – who determines the child has the illness – parent, doctor, provider or caregiver? If a parent said the child had influenza does that suffice and provider has to follow the protocol for reporting illness? Does influenza include the stomach flu or is it just the respiratory disease that is reportable?

Head lice does not require a licensed health care practitioner to diagnose. Parents need to be notified when the licensee observes one child with head lice.

The following diseases need to be diagnosed by a physician, physician’s assistant, advanced practice nurse, or registered nurse to verify the disease is present before notifying parents:

- Chicken pox
- Conjunctivitis
- Pin worm
- Ring worm
- Scabies
- Fifth disease

The following diseases need an actual “test” to verify the disease is present before notifying parents:

- Influenza
- RSV
- Rotavirus

Permission for Off Premises Supervision (3-006.19A, page 34):

1. Does permission from the parent have to be event specific or could it be a general permission that the parent gives permission that their child will be involved in events outside the program and supervised by staff?

Permission for Off Premises Supervision can be general in nature but should include the activities the Center will conduct off the premises of the Center so that parents can be informed where their children will be and have the opportunity to say no to any activity they do not want their child to attend. For example, the Center should provide parents with a list of the types of field trips and other off site activities that will be conducted throughout the summer and other seasons. Parents should never have to question where their children are at any time.

Use of Restraints (3-006.20, page 36)

1. What are the Department approved curriculums for de-escalation training?

1) Therapeutic Crisis Intervention (TCI) through Cornell University

- a. Registration/Payment: Alisa Burns ab358@cornell.edu (607) 255-4528
- b. On-site Training: Eugene Saville eas20@cornell.edu (607) 254-5210
- c. Trainer Certification: Kris Carlson kmc16@cornell.edu (607) 254-5440

The telephone contact numbers are on the website as well. There are no mailing addresses.
<http://rccp.cornell.edu/contact.html>

2) Non-Violent Crisis Intervention through the Crisis Prevention Institute.

- a. Crisis Prevention Institute; 10850 W. Park Place, Suite 600; Milwaukee, WI 53224; (888) 426-2184
<http://www.crisisprevention.com/Specialties/Nonviolent-Crisis-Intervention/Our-Program/Program-Overview>

3) The Mandt System

- a. The Mandt System; PO Box 831790; Richardson, TX 75083; (972) 495-0755;
- b. Training: kevin@mandtsystem.com
- c. <https://www.mandtsystem.com/schedule/overview/>

4) Therapeutic Aggression Control Techniques (TACT 2)

- a. All contacts are done via this website
<http://www.tact2.com/home.html>

5) Safe Crisis Management through JKM Training Inc

- a. JKM Training, INC.; 1710 Ritner Highway, Suite 1; Carlisle, PA 17013; (866) 960-4726
- b. info@jkmtraining.com
- c. <http://www.safecrisismanagement.com/main.aspx>

Cribs, Beds, and Sleeping Surfaces (3-006.22B, page 37)

1. If no one is sleeping in the cribs, must the cribs be three feet apart or can they just be moved when infants are placed in them?

Cribs or other sleeping surfaces (i.e. playpens, mats, cots) must be separated by at least three feet of space when children are sleeping or napping.

2. Regarding three (3) feet of space between children using mats, cots, etc., can cots be two feet apart if there is a barrier such as a book case between the two children?

No. When in use cribs, playpens, cots, and mats must be separated by at least three feet of space.

3. If the reason behind the 3 foot space between cribs is infants standing up and touching each other...then can Centers use plex-i-glass barriers on cribs and keep the infants who are 6 weeks to 9 months “head to toe” since they cannot stand yet?

No. Three feet of space between cribs, playpens, cots, mats, and sleeping bags has been a requirement for Child Care Centers for decades. Based on the feedback we are getting from some directors and licensees of Child Care Centers, it appears the requirement for three feet of space between cribs, playpens, cots and mats in the previous regulations was not consistently and universally enforced. In the old regulations, this requirement was located in the “sanitation” regulations which were enforced through once every two year sanitation inspections. Now, this requirement is included in the regulations enforced by the Child Care Licensing staff who inspect most Child Care Center twice each year. Also, in the training on the changes in the new regulations, Child Care Licensing staff are informing center directors and licensees, the three feet of separation requirement will be enforced,

To better understand the importance of maintaining a minimum of three feet of separation between children who are napping or sleeping in cribs or playpens or on cots and mats, I included the “Rationale” from Caring For Our Children for Sleep and Rest Areas (Standard 5.4.5, page 251):

RATIONALE: Separate sleeping and resting, even for siblings, reduces the spread of disease from one child to another. Droplet transmission occurs when droplets containing microorganisms generated from an infected person, primarily during coughing, sneezing, or talking are propelled a short distance (three feet) and deposited on the conjunctivae, nasal mucosa, or mouth (2). Because respiratory infections are transmitted by large droplets of respiratory secretions, a minimum distance of three feet should be maintained between cots, cribs, sleeping bags, beds, mats, or pads used for resting or sleeping (2). A space of three feet between cribs, cots, sleeping bags, beds, mats, or pads will also provide access by the staff to a child in case of emergency. If the facility uses screens to separate the children, their use must not hinder observation of children by staff or access to children in an emergency. Lice infestation, scabies, and ringworm are among the most common infectious diseases in child care. These diseases are transmitted by direct person-to-person contact. ...

COMMENTS: Although children freely interact and can contaminate each other while awake, reducing the transmission of infectious disease agents on large airborne droplets during sleep periods will reduce the dose of such agents to which the child is exposed overall. ...

The use of solid crib ends as barriers between sleeping children can serve as a barrier if they are three feet away from each other. (American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. 2011. Caring for our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd edition. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association.)

4. If a Child Care Center uses play pens in the toddler room for napping children over the age of 18 months, does the regulation specific to “no soft objects, bumper pads, toys, or loose bedding” apply? Does this mean that a toddler cannot have a loose blanket to cover themselves or any comfort toy or blanket if they nap in a play pen?

If play pens are used for napping children of any age, they must not contain soft objects, bumper pads, toys, or loose bedding. A blanket can be used, but it must be tucked under the pad of the play pen and reach no higher than the child’s chest.

5. Can infants wear bibs when they are sleeping or napping in cribs or play pens?

No. Bibs are considered “loose objects” and must be removed before an infant is placed in a crib or playpen for sleeping or napping.

6. Can a Child Care Center keep the crib with evacuation wheels on the premises and use it for emergency evacuation only? This crib does not meet new federal requirements so they would not use it for napping or sleeping.

Yes, a crib with evacuation wheels that does not meet the new federal requirements can be used for evacuation of children in the event of a fire or other emergency.

7. Are infant sleep sacks and swaddling sacks allowed?

Yes, infant sleep sacks and/or infant swaddling sacks are allowed.

8. Are objects such as mirrors or mobiles that attach to the side or hang above a crib allowed?

Child Care Licensing regulations do not address whether or not anything can be attached to the side of a crib or hung above a crib. If the object is not "in the crib", it is allowed.

9. If a Child Care Center has a note from an infant's physician stating the infant can sleep in a swing or bouncy seat, can a blanket be used?

Yes, there is no prohibition or limitation on blankets used for any child who is not sleeping or napping in a crib or playpen.

Infant Care Rooms (3-006.23A, page 38)

1. In a mixed age room that includes infants, (limited to no more than 12 children), and there are no more than 4 infants present in that room, can one staff member be responsible for those infants AND additional children as the ratios are then considered on the center wide basis?

In any room that includes infants, the staff-to –child ratio for the infants is one staff to no more than four infants. If there are other children in addition to four infants, at least one additional staff must be in the room with the four infants and other children.

Wading and Swimming Activities (3-006.25, page 39)

1. Swimming, centers page 40...several centers take children to city pools and they have "parent helpers" to help them meet the swimming ratio. The new regs would require that parent helpers be "staff" which would mean the parents need to meet all staff qualifications. Is there any way centers could use parents to meet swimming ratio without parents needing to meet staff qualifications?

Uncompensated parent helper means the parent of a child enrolled in the center who without compensation, assists in the care of children, who does not count in the staff-to-child ratio, and who is not left alone with children other than his/her own at the center.

Thus, parents who are not "staff" could not be included in the staff-to-child ratio for swimming or any other activity.

2. When a Child Care Center takes children to a swimming pool.....Can subs be used in ratio at the pool? Does a parent that is participating in Parent Training also go to the swimming pool?

Substitutes can be used in the staff-to–child ratio for swimming or other activities on or off the premises of the Child Care Center. Typically, substitutes would be filling in for a staff who was ill or on vacation, but they can be used as extra staff when needed for an activity like swimming that requires more staff.

Parents who are receiving Parent Training and Education can participate in activities such as swimming but they do not count in staff-to-child ratio, must not be left alone with any children other than their own, and must be supervised by the director or a teach at all times. (3-006.07 Parents Participating in Parent Training/Education)

3. What are the requirements for a Swimming Pool “permit” issued by the Department of Health and Human Services?

Here is the link to the DHHS Permit requirements for Swimming Pools:

http://dhhs.ne.gov/publichealth/Pages/puh_enh_san_swimming_swimindex.aspx

This web page includes the application forms and the regulations that govern swimming pools that require a permit, including those located on the premises of a licensed child care program used by the children enrolled in the program – Title 178 Nebraska Administrative Code Chapters 2 and 4.

Please feel free to contact any of the DHHS staff listed on the web site for more information about the process of obtaining a permit for a swimming pool.

Transportation (3-006.26, page 41)

1. Does a Child Care Center have to require a teacher to be with the van driver or hire a driver that meets the qualifications of a teacher when transporting children? The definition of “Support Staff” includes transportation staff. However, 3-006.06 #2 states that “a teacher must be in the room with support staff at all times when children are in care”.

A “teacher” does not have to be in the vehicle when children are transported and the driver does not have to meet teacher qualifications. When children younger than school-agers are being transported, staff-to-child ratio does have to be met with the driver of the vehicle counting as one staff.

2. If a Child Care Center rents/uses a school bus for field trips for school age, preschoolers and toddlers - is this allowed? The school bus does not have seat belts.

Child Care Centers may transport school-age children in a bus of any size without booster seats or seat belts/lap belts.

When transporting children younger than school-age, the answer depends on the size of the bus.

- **Child Care Centers cannot use buses that are under 10,000 lbs. to transport children under school age without having safety/booster seats and appropriate restraints.**
- **Child Care Centers can use buses that are over 10,000 lbs. to transport children of any age without having safety/booster seats or restraints.**

Child Care Centers that elect to transport children in buses over 10,000 lbs. without safety/booster seats and restraints are encouraged to consult with their insurance carrier to insure coverage for transportation services.

3. If a Child Care Center has a vehicle that carries more than 15 school-age children, how many staff are required in addition to the driver?

In a Child Care Center, any number of school-age-only children only may be transported with no staff in addition to the driver. There does not need to be an additional staff on the van/bus, regardless of the number of school-age children present. Only the driver needs to be on any vehicle that transports only school-age children. This only applies when ONLY school-age children are being transported.

4. Are additional staff members required in each van when going on field trips, with the teacher driving? Example: Can 10 preschoolers be transported with one teacher, who is also driving the van?

If children are going on a field trip, staff-to-child ratio needs to be met but not all the staff have to be “teachers”.

5. If a Child Care Center contracts with a company that provides transportation, what is required?

Child Care Center Transportation regulations need to be followed regardless of whether the Child Care Center provides transportation directly or contracts with another company to provide transportation services. This includes transportation training, maintaining staff-to-child ratio and all other transportation regulations.

6. If a Child Care Center wants to transport kids to a field trip, can the Center provide transportation for 13 children and two staff in van that holds 15. Other parents that are coming drive separately and take their own children. Would this be acceptable?

The answer depends on the ages of the children. This arrangement would be acceptable as long as staff-to child ratio is met with two staff based on the age of children who are being transported and participating in the field trip. Children who are being supervised by their own parents would not count in the staff-to-child ratio during the field trip.

7. As I understand it, parents cannot drive children in care like they used to before, correct? Can parents take other daycare kids in the car or only their own children?

Parents of enrolled children may transport their own children without any background checks. In order for parents to transport children other than their own, they must have the background checks required of a volunteer or meet staff requirements and background checks.

Medications (3-006.27, page 41)

1. Over the counter diaper cream and sunscreen - Do they need permission to put on child/is it considered a med? Is a blanket permission form in file ok to use to walk kids around block or go to park? Or do they need it daily if they are going to on a walk go to the park, etc.?

Over-the-counter, non-toxic topical ointments such as lip balm, petroleum jelly, sun block, and diaper ointment must be kept out of the reach of children (3-006.27G Medications)

These ointments are medications and parents must give permission for these ointments to be applied to their child. A “blanket” permission form is acceptable.

2. Does staff have to take medication training to be determined to be competent or how does a CCC Director assess that staff is competent? IS there a form or training to take?

The previous Child Care Center regulations required: “Center and preschool directors have the responsibility to assess the ability of staff to give or apply medication safely”.

New regulations go a step further: #15 in the Director Requirements (3-006.02) requires the Director to, “Develop and use written criteria to assess the ability of staff to give or apply medication safely”. Thus, Child Care Inspection Specialists will need to see the “written criteria” that the Director has developed and determine whether the criteria meets the criteria to assess the ability of staff to give or apply medications safely. Directors need to refer to the regulations for “Medications” when writing the criteria.

3. Is an Emergency Medical Technician (EMT) one of the licenses included in the “Competence to Give or Apply Medication” under 3-006.27 B?

No. Emergency Medical Technicians are not “licensed health care professionals” for whom administration of medications is included in their scope of practice. Licensed health care professionals who meet this criteria include: Medical Doctors, Physician’s Assistants, Advanced Practice Registered Nurses, and Registered Nurses.

Food Service (3-006.28, page 43)

1. One of the changes in the new regulations deals with the number of meals and snacks that are required to be served when children are in care for 10 or more hours. Please explain the change in 3-006.28A which requires two meals and two snacks to be served when children are in care for 10 or more hours. The Child Care Food Program only reimburses a maximum of three meals and snacks each day a child is care.

The requirement that children in care for 10 or more hours has been a requirement for Family Child Care Home I and II programs since May 1995. It was always the intent of the Child care Licensing Program to make the Child Care Center regulations consistent with the requirements for Family Child Care Homes. This change in the Child Care Center regulations was included in the two drafts that were reviewed in the August 2011 and August 2012 Public Hearings.

It is my understanding that the Child and Adult Care Food Program (CACFP) is not intended to cover the cost of all meals and snacks served to children in Child Care programs. Whether Child Care Centers are reimbursed for a meal or snack does not determine what is required. There are no USDA guidelines specific to the number of meals and snacks that are required to be served to children. CACFP references each state's Child Care Licensing regulations regarding how often and what time frames meals and snacks must be provided.

The addition of a second meal or snack for children in care for 10 or more hours was made in 1995 to address the health and well - being of children. Most children are in child care in the range of 4 to 9 hours/day. However, there are situations where children are in care 10 to 18 hours a day. Two meals and two snacks is not an unreasonable expectation in these circumstances.

Food Safety (3-006.29, pages 43 - 44)

1. If a physician approves the use of breast milk that has been frozen beyond three (3) months, can the Child Care Center accept a written doctor's statement to use that breast milk?

No. The regulation specific to frozen breast milk specifically states the amount of time breast milk kept in a freezer. Breast milk that has been frozen three months must be returned to the parent or discarded.

Animals/Pets (3-006.32C, page 47)

1. The regulation states "exotic/unusual animals...must not be allowed on the premises during the hours of operation". There are several programs in Omaha that provide educational presentations to schools/child care programs, such as the Henry Dorley Zoo, Fontenelle Forest, etc. that have exotic or unusual animals as part of their presentation to teach children not to judge or hate certain animals just based on their reputation and teaches them about kindness to all animals, etc. Some child care centers have the program come to the center/facility so that they do not have to transport young children. Usually these presentations occur one time in the summer. Can licensed programs allow exotic animals on the premises?

Any animals that are on the list of "exotic/unusual animals" cannot be allowed on the premises of the Child Care Center. This regulation does not prohibit animals that are not on the list of "exotic or unusual animals" from being on the premises or prohibit Centers from taking children to zoos or other facilities that have exotic/unusual animals with parental permission.

2. Is it ok for the occasional farmer parent to bring a lamb or other small farm animal for a visit? Do they need any paperwork?

As long as the animal is not on the list of exotic/unusual animals, it is OK to bring a small farm animal to the Child Care Center. No paper work would be required unless there was an incident that resulted in the injury of a child.

3. Can a parakeet be a pet in Child Care Center? Is this an animal that requires annual check-ups by a veterinarian and documentation of the examinations?

Some Health Care Facilities have aviaries that contain various types of birds. The inspectors for those facilities look for a certification that the birds are healthy. Birds that are not "poultry" (i.e. chicks, ducks) must be seen by a veterinarian once a year.

OTHER ITEMS OF INTEREST

1. Information on the insurance that will be required in the future should be posted on the Department's Children's Services Licensing website for providers to access.

Here is the link to the final language of the legislation - LB 105 – that will require licensed child care programs to obtain and maintain liability insurance on their child care program:

<http://www.nebraskalegislature.gov/FloorDocs/Current/PDF/Slip/LB105.pdf>

- **The requirement goes into effect for applicants for a child care license on July 1, 2014.**
- **The requirement goes into effect for programs that are already licensed July 31, 2014.**

If you have additional questions or want clarification on a question and answer in this document, please send an e-mail to Pat Urzedowski at this link: pat.urzedowski@nebraska.gov